

PATENT APPLICATION SERIAL NO. 10/521 640

Rec'd PCT/PTO 20 JAN 2005

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

01/26/2005 SNAJARRO 00000124 10521640

01 FC:2631	150.00 OP
02 FC:2632	250.00 OP
03 FC:2633	100.00 OP

06/13/2005 BCAMPBEL 00000031 10521640

01 FC:2642 200.00 OP

Adjustment date: 06/13/2005 BCAMPBEL
01/26/2005 SNAJARRO 00000124 10521640
02 FC:2632 -250.00 OP

PTO-1556
(5/87)

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6-11-05</u>		2 Serial/Patent # <u>10/521 640</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
✓	Other <u>Fee Code Correction</u>		<u>1-20-05</u>	\$ <u>50.00</u>							
		7 TOTAL AMOUNT OF REFUND		\$ <u>50.00</u>							
10 REASON:		8 TO BE REFUNDED BY:									
Overpayment		Treasury Check									
Duplicate Payment		Credit Deposit A/c #:									
No Fee Due (Explanation):		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td style="width: 20px;">0</td><td style="width: 20px;">2</td><td style="width: 20px;">--</td><td style="width: 20px;">4</td><td style="width: 20px;">3</td><td style="width: 20px;">7</td><td style="width: 20px;">7</td></tr></table>			0	2	--	4	3	7	7
0	2	--	4	3	7	7					
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>BC</u>		TITLE:									
SIGNATURE: <u>[Signature]</u>		<small>Repln. Ref: 06/13/2005 BCAMPREL 0021350700</small> <small>DA# PHONE Name/Number: 10521640</small> <small>FC: 9204</small> <small>\$50.00 CR</small>									
OFFICE:											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**